

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS**

In Re: MARY LOU CARRIZALES § Case No.: 08-08697  
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Debtor(s) §

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Tom Vaughn, Chapter 13 Trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 04/10/2008.
- 2) This case was confirmed on 07/16/2008.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 05/20/2009.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 11/03/2009.
- 6) Number of months from filing to the last payment: 19
- 7) Number of months case was pending: 23
- 8) Total value of assets abandoned by court order: NA
- 9) Total value of assets exempted: \$ 22,400.00
- 10) Amount of unsecured claims discharged without payment \$ .00
- 11) All checks distributed by the trustee to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$ 8,407.00
Less amount refunded to debtor	\$ 274.11
<b>NET RECEIPTS</b>	<b>\$ 8,132.89</b>

**Expenses of Administration:**

Attorney's Fees Paid through the Plan	\$ 3,500.00
Court Costs	\$ .00
Trustee Expenses and Compensation	\$ 583.65
Other	\$ .00

**TOTAL EXPENSES OF ADMINISTRATION** \$ 4,083.65

Attorney fees paid and disclosed by debtor	\$ .00
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**Scheduled Creditors:**

<u>Creditor Name</u>	<u>Class</u>	<u>Claim Scheduled</u>	<u>Claim Asserted</u>	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Int. Paid</u>
APPLIED CARD BANK	UNSECURED	1,142.76		NA	.00	.00
AT&T	UNSECURED	57.62		NA	.00	.00
CARE ONE CORRESPONDE	UNSECURED	292.00		NA	.00	.00
DIVISION DENTAL CLIN	UNSECURED	156.50		NA	.00	.00
HOLY CROSS HOSPITAL	UNSECURED	176.81		NA	.00	.00
ECAST SETTLEMENT COR	UNSECURED	419.08	414.78	414.78	414.78	.00
ST ANTHONY HOSPITAL	UNSECURED	60.00		NA	.00	.00
ST ANTHONY HOSPITAL	UNSECURED	78.75		NA	.00	.00
TARGET NATIONAL BANK	UNSECURED	5,667.27		NA	.00	.00
UIC MEDICAL CENTER	UNSECURED	15.00		NA	.00	.00
UIMC REFERENCE LIBRA	UNSECURED	76.49		NA	.00	.00
ECAST SETTLEMENT COR	UNSECURED	1,423.51	1,423.51	1,423.51	1,423.51	.00
UNIVERSITY OF IL HOS	UNSECURED	64.54		NA	.00	.00
UNIVERSITY OF IL HOS	UNSECURED	167.60		NA	.00	.00
UNIVERSITY OF IL MED	UNSECURED	167.60		NA	.00	.00
UNIVERSITY OF IL HOS	UNSECURED	234.71		NA	.00	.00
UNIVERSITY OF IL MED	UNSECURED	182.93		NA	.00	.00
GREGORY CARRIZALES	OTHER	.00		NA	.00	.00
COUNTRYWIDE HOME LOA	SECURED	366,350.57	365,949.76	.00	.00	.00
COUNTRYWIDE HOME LOA	SECURED	9,873.00	15,417.98	2,210.95	2,210.95	.00
WELLS FARGO AUTO FIN	SECURED	15,842.72	14,606.61	.00	.00	.00
COUNTRYWIDE HOME LOA	OTHER	NA	NA	NA	.00	.00

**Summary of Disbursements to Creditors:**

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Int. Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	.00	.00	.00
Mortgage Arrearage	2,210.95	2,210.95	.00
Debt Secured by Vehicle	.00	.00	.00
All Other Secured	.00	.00	.00
<b>TOTAL SECURED:</b>	2,210.95	2,210.95	.00
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	.00	.00	.00
Domestic Support Ongoing	.00	.00	.00
All Other Priority	.00	.00	.00
<b>TOTAL PRIORITY:</b>	.00	.00	.00
<b>GENERAL UNSECURED PAYMENTS:</b>	1,838.29	1,838.29	.00

**Disbursements:**

Expenses of Administration	\$ 4,083.65
Disbursements to Creditors	\$ 4,049.24

**TOTAL DISBURSEMENTS:** \$ 8,132.89

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 03/11/2010

/s/ Tom Vaughn  
Tom Vaughn, Chapter 13 Trustee

**STATEMENT :** This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.